

Atty. Docket No.: _____

Named Inventor: BOUFFARD FITA, FERNANDO

Check One:

Complete If Known:

- ☐ Declaration Submitted
with Initial Filing
- ☐ Declaration Submitted After
Initial Filing (Surcharge under
37 C.F.R. § 1.16(e) Required).

OR:

Application No.: PCT/EP2004/050967
Filing Date: June 1, 2004
Art Unit: _____
Examiner Name: _____

DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

As a below named inventor(s), each of us respectively hereby declares that:

Each of our residences, mailing addresses, and citizenships are as stated below next to our respective names.

I believe I am the original, first, and joint inventors (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

ANESTHETIC COMPOSITION FOR TOPICAL ADMINISTRATION

the specification of which

- ☐ is attached hereto,
- ☒ was filed on (MM/DD/YYYY) June 1, 2004 as
United States Application Number _____ and/or
PCT International Application Number PCT/EP2004/050967
and was amended on (MM/DD/YYYY) _____
(if applicable)

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claim(s), as amended by any amendment specifically referred to above.

I do not know and do not believe that the claimed invention was ever known or used in the United States of America before our invention thereof, or patented or described in any printed publication in any country before our invention thereof or more than one year prior to this application. I do not know and do not believe that the claimed invention was in public use or on sale in the United States of America more than one year prior to this application, nor do I know or believe that the invention has been patented or made the subject of an inventor's certificate issued before the date of this application in any country foreign to the United States of America on an application filed by any of us or our legal

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representatives or assigns more than twelve months (for a utility patent application) or six months (for a design patent application) prior to this application.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 C.F.R. 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed:

Prior Foreign Application(s)

PCT/EP2004/050967	EPO	June 1, 2004	Priority Claimed?	
(Number)	(Country)	(Foreign Filing Date - MM/DD/YYYY)	Yes	No
			Yes	No

I hereby appoint the attorneys associated with Customer Number 45346, namely:

Peter B. Scull, Reg. No. 37,932 and Richard J. Holzer, Jr. Reg. No. 42,668

as our respective patent attorneys and patent agents, with full power of substitution and revocation, to prosecute this application and to transact all business in the U.S. Patent and Trademark Office connected herewith.

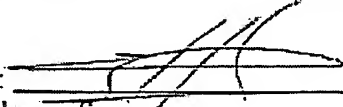
Direct all correspondence to the correspondence address of Customer Number 45346, namely:

Peter B. Scull (telephone 720-377-0773)
Hensley Kim & Edgington, LLC
1660 Lincoln Street, Suite 3050
Denver, CO 80264

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I hereby declare that all statements made herein of our own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full Name of Inventor: FERNANDO, BOUFFARD FITA

Inventor's Signature:  Date: _____

Residence: Barcelona, Spain Citizenship: Spanish

Mailing Address: C. Lope de Vega, 104 bajos
E-08005 Barcelona, Spain

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